

## BEST AVAILABLE COPY

10. Preparation according to Claim 9, wherein said NO-synthase inhibitor or salts thereof further comprises L<sup>G</sup>-Nitro-L-arginine methyl ester hydrochloride.

**Please substituted claims 19-21 with amended claims 19-21:**

19. A method for the prophylaxis and treatment of rosacea and couperose which comprises applying to a patient in need thereof an effective amount of an NO-synthase inhibitor or salt thereof which is selected from the group consisting of N<sup>G</sup>-monoethyl-L-arginine monoacetate, 2-Iminobiotin, L-N<sup>5</sup>-(1-iminoethyl)-ornithine, S-Methylisothiurea sulphate, S-Methyl-L-thiocitrulline, L-N<sup>G</sup>-(1-iminoethyl)lysine, 7-Nitroindazole, S,S'-1,3-Phenylene-bis(1,2-ethanediyl)-bis-isothiurea, L-Thiocitrulline, alpha-N-acetyl-N<sup>G</sup>-nitro-L-arginine methyl ester and salts thereof.
20. The method of claim 19, wherein said NO-synthase inhibitor is selected from the group consisting of 2-Iminobiotin, L-N<sup>5</sup>-(1-iminoethyl)-ornithine, S-Methylisothiurea sulphate, S-Methyl-L-thiocitrulline, L-N<sup>G</sup>-(1-iminoethyl)lysine, 7-Nitroindazole, S,S'-1,3-Phenylene-bis(1,2-ethanediyl)-bis-isothiurea, L-Thiocitrulline, and salts thereof.
21. The method of claim 20, wherein said NO-synthase inhibitor or salt thereof further comprises L<sup>G</sup>-Nitro-L-arginine methyl ester hydrochloride.

**Please substitute claims 26 and 27 with amended claims 26 and 27:**

26. The preparation of claim 25, wherein the amount of NO-synthase inhibitor is from 0.01% to 10% by weight based on the total weight of the preparation.
27. The preparation of claim 26, wherein the amount of NO-synthase inhibitor is from 0.1% to 5% by weight based on the total weight of the preparation.

**CONDITIONAL PETITION FOR EXTENSION OF TIME**

If entry and consideration of the amendments above requires an extension of time, Applicants respectfully request that this be considered a petition therefor. The Assistant Commissioner is authorized to charge any fee(s) due in this connection to Deposit Account No. 14-1263.

**ADDITIONAL FEE**

Please charge any insufficiency of fees, or credit any excess, to Deposit Account No. 14-1263.